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SEMS DocID 2260894

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION III
1650 Arch Street
Philadelphia, Pennsylvania 19103-2029

FEB 0 2 2017

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Richard Heller
4326 Acacia Circle
Coconut Creek, FL 33066-2051

Re: Request for Financial Information
Lower Darby Creek Area Superfund Site – Clearview Landfill
Philadelphia and Darby Township, Pennsylvania

Dear Mr. Heller:

You previously received notice of your potential liability at the Clearview Landfill, Operable Unit 1 ("OU1") of the Lower Darby Creek Area Superfund Site ("Site") by letters dated March 4, 2013 and January 16, 2015. The U.S. Environmental Protection Agency ("EPA") is now seeking updated information related to your ability pay for or perform the clean-up required at the Clearview Landfill, located along Darby Creek in Darby Township and Philadelphia, Pennsylvania. The specific information required is attached to this letter as Enclosures E and F. Further directions regarding your response to this letter can be found in Enclosures A, B, C, and D.

Pursuant to the authority of Section 104(e) CERCLA 42 U.S.C. § 9604(e), EPA has the authority to require you, Richard Heller, to furnish all information and documents in your possession, custody or control, or in the possession, custody or control of any of your employees or agents, which concern, refer, or relate to your individual ability to pay EPA's costs in cleaning up OU1 of the Site.

Section 104 of CERCLA authorizes EPA to pursue penalties for failure to comply with that section or for failure to respond adequately to required submissions of information. In addition, providing false, fictitious, or fraudulent statements or representations may subject you to criminal penalties under 18 U.S.C. § 1001. The information you provide may be used by EPA in administrative, civil, or criminal proceedings.

You must respond in writing to this required submission of information (see **Enclosures E and F** for the specific information requested) within **thirty (30) calendar days** of your receipt of this letter.

If, for any reason, you do not provide all information responsive to this letter, then in your answer to EPA you must: (1) describe specifically what was not provided, and (2) provide to EPA an appropriate reason why the information was not provided.

All documents and information should be sent to:

Ms. Carlyn Winter Prisk (3HS62)
U.S. Environmental Protection Agency
Region III
1650 Arch Street
Philadelphia, PA 19103-2029

This required submission of information is not subject to the approval requirements of the Paperwork Reduction Act of 1980, 44 U.S.C. § 3501, et seq.

If you have any questions concerning this Information Request, please contact Ms. Prisk at (215) 814-2625, or have your attorney contact Judith Hykel at (215) 814-2646.

Sincerely,

Joanne Marinelli, Chief
Cost Recovery Branch

Enclosures:

A. Business Confidentiality Claims/Disclosure of Your Response to EPA Contractors and Grantees
B. List of Contractors that May Review Your Response
C. Definitions
D. Instructions
E. Information Requested
F. Financial Statement of Individual Debtor

cc: Judith Hykel (3RC43)
Carlyn Winter Prisk (3HS62)
John Moscato (USDOJ)
Andrew J. Donaghy, Esq. (17 West Third Street, P.O. Box 108, Media, PA 19063)
Noreen Wagner (PADEP)

Enclosure A

Business Confidentiality Claims

You are entitled to assert a claim of business confidentiality covering any part or all of the submitted information, in the manner described in 40 C.F.R. Part 2, Subpart B. Information subject to a claim of business confidentiality will be made available to the public only in accordance with the procedures set forth in 40 C.F.R. Part 2, Subpart B. If a claim of business confidentiality is not asserted when the information is submitted to EPA, EPA may make this information available to the public without further notice to you. You must clearly mark such claimed information by either stamping or using any other such form of notice that such information is a trade secret, proprietary, or company confidential. To best ensure that your intent is clear, we recommend that you mark as confidential each page containing such claimed information.

Disclosure of Your Response to EPA Contractors and Grantees

EPA may contract with one or more independent contracting firms (See, Enclosure B) to review the documentation, including documents which you claim are confidential business information ("CBI"), which you submit in response to this information request, depending on available agency resources. Additionally, EPA may provide access to this information to (an) individual(s) working under (a) cooperative agreements(s) under the Senior Environmental Employee Program ("SEE Enrollees"). The SEE Program was authorized by the Environmental Programs Assistance Act of 1984 (Pub. L. 98-313). The contractor(s) and/or SEE Enrollee(s) will be filing, organizing, analyzing and/or summarizing the information for EPA personnel. The contractors have signed a contract with EPA that contains a confidentiality clause with respect to CBI that they handle for EPA. The SEE Enrollee(s) is working under a cooperative agreement that contains a provision concerning the treatment and safeguarding of CBI. The individual SEE Enrollee has also signed a confidentiality agreement regarding treatment of CBI. Pursuant to Section 104(e)(7) of CERCLA, 42 U.S.C. § 9604(e)(7), and EPA's regulations at 40 C.F.R. § 2.310(h), EPA may share such CBI with EPA's authorized representatives which include contractors and cooperators under the Environmental Programs Assistance Act of 1984. (See 58 Fed.Reg. 7187 (1993)). If you have any objection to disclosure by EPA of documents which you claim are CBI to any or all of the entities listed in Enclosure B, you must notify EPA in writing at the time you submit such documents.

Enclosure B

[rev. 12/2016]

List of Contractors That May Review Your Response

Emergint Technologies, Inc.
Contract # EP-W-11-025
Subcontractor: Booz-Allen & Hamilton

Booz-Allen & Hamilton
Contract # EP-W-11-016

CDM-Federal Programs Corporation
Contract # EP-S3-07-06
Subcontractors: CDI-Infrastructure, LLC d/b/a L.R. Kimball
Avatar Environmental LLC
Terradon Corporation

Cherokee Nation Assurance, LLC
Contract #EP-S3-14-01

EA Engineering, Science and Technology, Inc.
Contract #EP-S3-07-07
Subcontractor: URS

Eisenstein Malanchuck, LLP
Contract #EP-W-13-006
Subcontractors: R. M. Fields International, LLC

Hydrogeologic (HGL)
Contract #EP-S3-07-05
Subcontractor: CH2MHill
Sullivan International

Weston Solutions
Contract #EP-S3-1502

Tech Law, Inc. (Removal Program)
Contract #EP-S3-1503

Tetra Tech NUS, Inc.
Contract #EP-S3-07-04

Kemron Environmental Services, Inc.
Contract #EP-S3-12-01,
Subcontractor: AECOM Technical Services, Inc.

Guardian Environmental Services Company, Inc.
Contract #EP-S3-12-02,
Subcontractors: Aerotek, Inc.,
Tetra Tech, Inc.

Environmental Restoration, LLC
Contract # EP-S3-12-03
Subcontractors: Aerotek, Inc
Haas Environmental, Inc,
Hertz

Northstar Federal Services, Inc.
Contract # EP-S3-12-05

ICF International
Contract # EP-BPA-12-W-0003

<u>Cooperative Agreements</u>

National Association of Hispanic Elderly
CA# CQ-835398

National Older Workers Career Center
CA# Q-835621

Enclosure C

Definitions

1. The term "arrangement" shall mean every separate contract or other agreement or understanding between two or more persons, whether written or oral.

2. The term "documents" shall mean writings, photographs, sound or magnetic records, drawings, or other similar things by which information has been preserved and also includes information preserved in a form which must be translated or deciphered by machine in order to be intelligible to humans. Examples of documents include, but are not limited to, electronic mail and other forms of computer communication, drafts, correspondence, memoranda, notes, diaries, statistics, letters, telegrams, minutes, contracts, reports, studies, checks, statements, receipts, summaries, pamphlets, books, invoices, checks, bills of lading, weight receipts, toll receipts, offers, contracts, agreements, deeds, leases, manifests, licenses, permits, bids, proposals, policies of insurance, logs, inter-office and intra-office communications, notations of any conversations (including, without limitation, telephone calls, meetings, and other communications such as e-mail), bulletins, printed matter, computer printouts, invoices, worksheets, graphic or oral records or representations of any kind (including, without limitation, charts, graphs, microfiche, microfilm, videotapes, recordings and motion pictures), electronic, mechanical, magnetic or electric records or representations of any kind (including, without limitation, tapes, cassettes, discs, recordings and computer memories), minutes of meetings, memoranda, notes, calendar or daily entries, agendas, notices, announcements, maps, manuals, brochures, reports of scientific study or investigation, schedules, price lists, data, sample analyses, and laboratory reports.

3. The term "hazardous substance" means (a) any substance designated pursuant to section 1321(b)(2)(A) of Title 33 of the U.S. Code, (b) any element, compound, mixture, solution, or substance designated pursuant to Section 9602 of CERCLA, (c) any hazardous waste having the characteristics identified under or listed pursuant to Section 3001 of the Solid Waste Disposal Act (42 U.S.C. § 6921) (but not including any waste the regulation of which under the Solid Waste Disposal Act, 42 U.S.C. § 6901 et seq., has been suspended by Act of Congress), (d) any toxic pollutant listed under Section 1317(a) of Title 33, (e) any hazardous air pollutant listed under section 112 of the Clean Air Act, 42 U.S.C. § 7412, and (f) any imminently hazardous chemical substance or mixture with respect to which the Administrator has taken action pursuant to Section 2606 of Title 15 of the U.S. Code. The term does not include petroleum, including crude oil or any fraction thereof which is not otherwise specifically listed or designated as a hazardous substance under subparagraphs (a) through (f) of this paragraph, and the term does not include natural gas, natural gas liquids, liquefied natural gas, or synthetic gas usable for fuel (or mixtures of natural gas and such synthetic gas).

4. The term "pollutant or contaminant" shall include, but not be limited to, any element, substance, compound, or mixture, including disease-causing agents, which after release into the environment and upon exposure, ingestion, inhalation, or assimilation into any organism, either directly from the environment or indirectly by ingestion through food chains, will or may reasonably be anticipated to cause death, disease, behavioral abnormalities, cancer, genetic mutation, physiological malfunctions (including malfunctions in reproduction) or physical

deformations in such organisms or their offspring, except that the term "pollutant or contaminant" shall not include petroleum, including crude oil or any fraction thereof which is not otherwise specifically listed or designated as a hazardous substance under CERCLA, and shall not include natural gas, liquefied natural gas, or synthetic gas of pipeline quality (or mixtures of natural gas and such synthetic gas).

5. The term "release" means any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment (including the abandonment or discarding of barrels, containers, and other closed receptacles containing any hazardous substance or pollutant or contaminant), but excludes (a) any release which results in exposure to persons solely within a workplace, with respect to a claim which such persons may assert against the employer of such persons, (b) emissions from the engine exhaust of a motor vehicle, rolling stock, aircraft, vessel, or pipeline pumping station engine, (c) release of source, byproduct, or special nuclear material from a nuclear incident, as those terms are defined in the Atomic Energy Act of 1954, 42 U.S.C. § 2011 et seq., if such release is subject to requirements with respect to financial protection established by the Nuclear Regulatory Commission under Section 170 of such Act, 42 U.S.C. § 2210, or, for the purposes of Section 9604 of CERCLA or any other response action, any release of source, byproduct, or special nuclear material from any processing site designated under 42 U.S.C. §§ 7912(a)(1) and 7942(a) and (d) the normal application of fertilizer.

6. The term "waste" or "wastes" shall mean and include any discarded materials including, but not limited to, trash, garbage, refuse, by-products, solid waste, hazardous waste, hazardous substances, pollutants or contaminants, and discarded or spilled chemicals, whether solid, liquid, or sludge.

7. The term "you" when referring to an incorporated entity shall mean and include the incorporated entity and its agents and representatives, including, but not limited to, persons directly authorized to transact business on the entity's behalf such as officers, directors, or partners with which the entity is affiliated, employees, accountants, engineers, or other persons who conduct business on the entity's behalf, as well as affiliated entities, including, but not limited to, partnerships, limited liability companies, divisions, subsidiaries, and holding companies.

Enclosure D

Instructions

1. You are entitled to assert a claim of business confidentiality covering any part or all of the information you submit. If you desire to assert a claim of business confidentiality, please see Enclosure A, *Business Confidentiality Claims/Disclosure of Your Response to EPA Contractors and Grantees*. You must clearly mark such information by either stamping or using any other form of notice that such information is a trade secret, proprietary, or company confidential. To ensure to the greatest extent that your intent is clear, we recommend that you mark as confidential each page containing such claimed information.

2. Please provide a separate, detailed narrative response to each question, and to each subpart of each question, set forth in this Information Request. If you fail to provide a detailed response, EPA may deem your response to be insufficient and thus a failure to comply with this Information Request, which may subject you to penalties.

3. Precede each response with the number of the question or subpart of the question to which it corresponds. For each document or group of documents produced in response to this Information Request, indicate the number of the specific question or subpart of the question to which the document(s) responds.

4. Should you find at any time after submission of your response that any portion of the submitted information is false, misrepresents the truth or is incomplete, you must notify EPA of this fact and provide EPA with a corrected written response.

5. Any terms that are used in this Information Request and/or its Enclosures that are defined in CERCLA shall have the meaning set forth in CERCLA. Definitions of several such terms are set forth in Enclosure C, *Definitions*, for your convenience. Also, several additional terms not defined in CERCLA are defined in Enclosure C. Those terms shall have the meaning set forth in Enclosure C any time such terms are used in this Information Request and/or its Enclosures.

Enclosure E

Information Required

1. Return a completed copy of the document titled "Financial Statement of Individual Debtor" (Enclosure F) based on your individual finances. In completing this document please indicate clearly for all assets and debts identified on the questionnaires the type of ownership of each asset described, i.e., owned individually by you, owned jointly or owned with other parties.

2. In addition to completion of this financial statement, you are required to provide a copy of your individual U.S. Individual Income Tax Return, Form 1040, for the years 2013 through 2015 and for 2016 when it is available. You must provide a copy of the tax return submitted to the Internal Revenue Service that contains <u>any and all attachments</u> that would be required by the Internal Revenue Service at the time of filing and include a copy of all forms, worksheets, notices, etc. associated with tax changes, assessments, increases or proposed assessments made by the U.S. Internal Revenue Service. If any of the income, loss or gain reported on the return relates to partnership, trust or subchapter S sources, please provide a copy of the 1065, 1041 or 1120S return as well as any and all attachments that would be required by the Internal Revenue Service at the time of filing. Furthermore, if any of the returns provided have been audited, corrected, amended or changed, or if you have been notified of an audit, please describe the circumstances pertaining to that event.

3. Provide a copy of any and all personal financial statements that apply to the last five years, including all internal and external audits, balance sheets, income statements and other statements that purport to describe your net worth and/or income and expenses. In addition, if at any point in the last five years you were required to submit financial statements, please provide a copy of what was submitted as well as an explanation which describes the reason for submission (e.g., for a loan or for demonstration of the financial capability to deliver on a contract).

4. a. Please provide copies of all rental agreements, easements, exclusive rights to use, options to buy, or other documents that describe interests in Real Estate possessed by you, or possessed by other entities for your benefit, currently in existence or which were in effect for the past five years.

   b. If there are any oral agreements or other unwritten agreements pertaining to any Real Estate interests described in response to Question 4a, above, please provide the specifics as to the length of the agreement, the specific requirements of the agreement and the compensation payable regarding the agreement.

Enclosure F

Financial Statement of Individual Debtor

FINANCIAL DISCLOSURE STATEMENT
TO BE COMPLETED BY INDIVIDUAL DEFENDANT

A. GENERAL INSTRUCTIONS - READ CAREFULLY

The information requested in the following form is to be submitted concerning a current case in connection with an asset investigation. Prior to completing and submitting this form, you should discuss this matter and this form thoroughly with your own attorney.

The purpose of this form is to determine what assets you may have or are in control of. If you are married or have a live-in companion, you must list assets held by your spouse or companion, as well as yourself, and show whether each asset is owned individually or jointly. By completing and signing this financial disclosure statement, you acknowledge that the information provided will affect action by the United States Department of Justice and further understand that any false answers can lead to the termination or nullification of any plea agreement ultimately reached and/or prosecution for false statements as provided under Title 18, United States Code, Section 1001 (maximum prison sentence of five (5) years and/or a fine of not more than $250,000).

Each separate question must be answered completely. If the answer is "none" you must state "none." Do not leave any question unanswered.

You must date and initial each page, and sign the last page and accompanying Release. If there is insufficient space on the form, please attach additional sheets as necessary, and date and initial each additional page.

ACKNOWLEDGMENT, IF REPRESENTED BY COUNSEL

I _____ am _____ am not (check one) represented by counsel in the collection of this debt. If I am represented by retained or appointed counsel, I acknowledge having reviewed the foregoing instructions with my counsel. My counsel's name is ______________________________.

Date:__________ **Name:**____
Last First Middle

Signature____

Authority for the solicitation of the requested information includes one or more of the following: 5 U.S.C. § 301, 901 (see Note, Executive Order 6166, June 10, 1933); 28 U.S.C. § 501 -530A; 28 U.S.C. § 1651, 3201 -3206; 31 U.S.C. § 3701 -3731; 44 U.S.C. § 3101; 4 C.F.R. § 101 -101.8; 28 C.F.R. § 0.160, 0.171 and Appendix to Subpart Y; 18 U.S.C. § 3664(d)(3).

The principal purpose for gathering this information is to evaluate your ability to pay the government's claim or judgment against you. Routine uses of the information are established in the following U.S. Department of Justice Case File Systems published in Vol. 42 of the Federal Register, Justice/CIV-001 at page 5332; Justice/TAX-001 at page 15347; Justice/USA-005 at pages 53406-53407; Justice/USA-007 at pages 53408-53410; Justice/CRIM-016 at pages 12774. Disclosure of the information is voluntary. If the requested information is not furnished, the United States may seek disclosure through other means.

FINANCIAL DISCLOSURE STATEMENT

A. PERSONAL IDENTIFYING DATA

FULL NAME:____
(Last) (First) (Middle)

Circle appropriate title: Mr. Ms. Mrs. Dr. Jr. III

2. STATE ALL OTHER NAMES BY WHICH YOU HAVE EVER BEEN KNOWN.	a.
b.	c.

3. YOUR DATE OF BIRTH MONTH/DAY/YEAR	4. YOUR DRIVER'S LICENSE NO. AND STATE OF ISSUANCE.	5. YOUR SOCIAL SECURITY NO.	6. YOUR HOME TELEPHONE NUMBER	7. YOUR CELLULAR TELEPHONE NUMBER
________/____/19___	No.________________ State ________________	______/_____/______	(___)____-______	(___)____-______

8. PRESENT HOME ADDRESS	9. DATES OF RESIDENCE	10. YOUR EMAIL ADDRESS
________________________ Address ________________________ State Zip Code	_____/_____/19_____ to Present	______________@______________

EDUCATION		Check all that apply	Location of School
11. PROVIDE YOUR EDUCATIONAL BACKGROUND.	Less Than 12 years		
	High School Diploma or equivalent		
	Vocational School		
	College (provide degree or no. of years attended		
	Post Graduate (provide degree of no. of years attended		
	Vocational School		
12. PROFESSIONAL LICENSES:	Type:	Expiration Date:	

B. EMPLOYMENT INFORMATION

13. FULL NAME OF PRESENT EMPLOYER:

14. OCCUPATION:

15. DATES OF EMPLOYMENT: From: ________/_____/19____ to Present

16. BUSINESS ADDRESS:______________________________State _____ Zip________Tel. No.(_______)______________________

PREVIOUS EMPLOYER (List all previous employers for past five (5) years.) Please include addresses and dates of employment.

17. COMPANY NAME: ______________________________ Dates Employed: From: ______/_____/19___ to____/____/19___
OCCUPATION: ______________________________
ADDRESS: ______________________________STATE _____ ZIP ________ Telephone No.(_______)__________

Initials ________

18. COMPANY NAME: ______________________ Dates Employed: From: ____/____/19__ to ____/____/19__
OCCUPATION: ______________________
ADDRESS: ______________________ STATE ____ ZIP ______ Telephone No.(______)__________

19. COMPANY NAME: ______________________ Dates Employed: From: ____/____/19__ to ____/____/19__
OCCUPATION: ______________________
ADDRESS: ______________________ STATE ____ ZIP ______ Telephone No.(______)__________

20. COMPANY NAME: ______________________ Dates Employed: From: ____/____/19__ to ____/____/19__
OCCUPATION: ______________________
ADDRESS: ______________________ STATE ____ ZIP ______ Telephone No.(______)__________

C. EARNINGS (SALARY, WAGES, COMMISSIONS, ETC.) AND BACKGROUND INFORMATION

21. YOUR GROSS SALARY FROM YOUR PRESENT EMPLOYER. MARK ONE: a. Weekly ☐ b. Bi-Weekly ☐ c. Monthly ☐	$	d. YOUR TAKE HOME PAY.	$

22. ARE YOU CURRENTLY AN ACTIVE MEMBER OF THE ARMED FORCES, INCLUDING NATIONAL GUARD AND RESERVES?	Yes	
	No	

a. IF YES, PLEASE GIVE THE NAME, ADDRESS AND TELEPHONE NUMBER OF YOUR UNIT AND HOW MANY YEARS REMINING IN YOUR ENLISTMENT.

b. Unit	c. Term

23. DO YOU HAVE ANY OTHER EARNED INCOME FROM ANY OTHER SOURCE OR BUSINESS?	Yes	
	No	

a. IF YES, PLEASE IDENTIFY EACH SOURCE AND STATE YOUR MONTHLY GROSS EARNINGS (SALARY, WAGES, COMMISSIONS, ETC.) FROM EACH SOURCE.

b. Source	c. Income

Initials ______

24. GARNISHMENT: Are you or your spouse/companion's wages under garnishment at this time?	Yes	
	No	

IF YES, PROVIDE SPECIFIC DETAILS.

25. LIST EACH PREVIOUS HOME ADDRESS (Include all permanent or temporary residences and dates of occupancy for the last five (5) years.)				
a. Dates of residence:	Address	City	State	Zip Code
b. Dates of residence:	Address	City	State	Zip Code
c. Dates of residence:	Address	City	State	Zip Code
d. Dates of residence:	Address	City	State	Zip Code

26. RENTAL AGREEMENT. Do you or your spouse/companion rent the premises on which you live? If YES, please complete the following:	Yes	
	No	

Name of Landlord	b. Address/telephone number of Landlord	c. Payment Schedule (weekly, monthly,annually)	d. Rent Payment	e. Utilities included in rent	f. Deposit or other funds held by landlord
			$		$

27. MARITAL STATUS (Mark one box to show your current marital status and provide information about your spouse(s) below.).

a. Never Married: ☐ b. Married ☐ c. Separated: ☐ d. Legally Separated ☐ e. Divorced ☐ f. Widowed ☐

28. NAME OF SPOUSE/COMPANION ______________________________

(Last) (First) (Middle)

a. SPOUSE/COMPANION'S DATE OF BIRTH Month/Day/Year	b. SPOUSE/COMPANION'S HOME TELEPHONE NUMBER	c. SPOUSE/COMPANION'S CELLULAR TELEPHONE NUMBER
________/____/19_____	( )	( )

c. SPOUSE/COMPANION'S OCCUPATION	d. BUSINESS TELEPHONE NUMBER
	( )

29. SPOUSE/COMPANION'S EMPLOYER

a. NAME

b. ADDRESS ______________________________STATE____________ ZIP__________Telephone No.______________

Initials _____

30. LIST NAME OF EACH FORMER SPOUSE AND DATES OF MARRIAGE(S)	DATES OF MARRIAGE
a. Name	From: ____/____/19__ to ____/____/19__
b. Name	From: ____/____/19__ to ____/____/19__
c. Name	From: ____/____/19__ to ____/____/19__
d. Name	From: ____/____/19__ to ____/____/19__

31. DEPENDENT CHILDREN/RELATIVES (List type of relationship and date of birth of each person listed.)

a. Complete Name(s)	b. Relationship	c. Date of Birth	d. Cellular telephone number	e. Do these relatives reside with you. (Circle one)
				YES NO
				YES NO
				YES NO
				YES NO
				YES NO
				YES NO

32. CHILD SUPPORT PAYMENTS RECEIVED - Do you or your spouse/companion receive child support payments? If yes, complete the following:	
Yes	
No	

Name of dependent	Dependent's Date of Birth	Name of non-custodial parent	Name of Custodial Parent	List arrearage (if any)

CHILD SUPPORT PAYMENTS MADE - Do you or your spouse/companion make child support payments? If yes, answer the following:	
Yes	
No	

Name of dependent	Dependent's Date of Birth	Name of non-custodial parent	Name of Custodial Parent	List arrearage (if any)

Initials _____

33. Do you receive or expect to receive aid to families with dependent children, unemployment compensation or any other type of assistance from the United States, your own state, any other governmental agency or any other person? If yes, list the source and amount.			
a. Source of Payment (name of 'son, state, etc.)	b. Program	c. Payment Amount	d. Payment schedule

34. Name of each bank, credit union and any other financial institution or company with which you, your spouse/companion, or any other person or entity associated with you have or have ever had any account at any time during the past five (5) years.			
a. Name of Financial Institution and Address	b. Name(s) on Account	c. Account No. and Type	d. Current Balance in Account

35. SAVINGS BONDS: Do you, your spouse/companion or your defendants own U.S. Savings Bonds?.			
a. Demonination of Bond	b. Name(s) on Bond	c. Purchase Date	d. Value

36. INDIVIDUAL RETIREMENT ACCOUNT. Do you or your spouse have any Individual Retirement Account ("IRA"), Keogh Account, other retirement account or savings, or any interest in any profit-sharing or pension plan? If YES, please identify each account by name of financial institution, address, account number and name on account.			Yes / No
a. Name of Financial Institution and address	b. Name(s) on Account	c. Account No. And Type	d. Current Balance In Account

37. SAFETY DEPOSIT BOXES: Do you, or your spouse, or any other person maintain or rent a safety deposit box in your name(s) or in any other name? If YES, give name and address of banks(s) and name(s) utilized to open or maintain the safety deposit box(es).			Yes / No
a. Name of Financial Institution and Address	b. Safety Deposit Box No.	c. Account No.	d. Type of Account

Initials ______

D. ASSETS AND LIABILITIES

38. Do you or your spouse/companion have any interest in any real estate anywhere in the world? (This includes any real estate currently being sold under contract.) If YES, identify each real estate interest as stated below.		
	Yes	
	No	

a. Complete Address (Include State and County)	b. Name on Deed	c. Purchase Price	d. Fair Market Value	e. Balance Due on Mortgage	f. Monthly Payment	g. Date Mtg. Paid Off
		$	$	$	$	
		$	$	$	$	
		$	$	$	$	

g. LEASEHOLD INTERESTS. If any real estate holdings are income producing properties, identify tenants name and address and current lease terms. Provide income statemens and/or tax returns for the last two years for each rental property.

Name on lease: ______________________
Address: ______________________
City: ______________________ State ________
Zip: __________ TERM: ______________________

Name on lease: ______________________
Address: ______________________
City: ______________________ State ________
Zip: __________ TERM: ______________________

Name on lease: ______________________
Address: ______________________
City: ______________________ State ________
Zip: __________ TERM:

39. Do you or your spouse/companion or dependents own or have possession of any automobiles, boats, aircrafts, other vehicles or mobile homes? If YES, specify as stated below.

a. Description: Include Year, Make and Model	b. Do you own the vehicle or property?		c. Purchase Price	d. Loan Balance
	Yes	No		
Automobile			$	$
Automobile (2nd)			$	$
Automobile (3rd)			$	$
Boat			$	$
Truck			$	$
Recreational Vechicles (campers, Motor homes)			$	$
Utility Trailer			$	$
Any other vehicles (Including ATVs, Jet-Skis, snowmobiles)			$	$
Aircraft			$	$
Mobile Home			$	$
Motorcycle			$	$

Initials _____

40. Do you or your spouse/companion or dependents own or have possession of any sporting goods? If YES, specify as stated below.

. Description: Include Year, Make and Model	b. Do you own the property?		c. Purchase Price	d. Loan Balance
	Yes	No		
Guns			$	$
Hunting Gear			$	$
Recreational Equipment (pool table, pinball machine)			$	$
Swimming Pool			$	$
Jacuzzi/Hot Tub			$	$
Sauna			$	$
Any other equipment			$	$

41. Do you or your spouse/companion or dependents own or have possession of any miscellaneous assets? If YES, specify as stated below.

a. Description:	b. Do you own the asset?		c. Purchase Price	d. Loan Balance
	Yes	No		
Animals			$	$
Season Tickets			$	$
Time Shares			$	
E-Trade Accounts			$	$
ˌiners/Deposits/Advance Payments			$	$
Mineral Interests			$	$
Other (describe)			$	$

42. SECURITIES: Do you or your spouse own any Securities (bonds, stocks, mutual funds, etc.)? If YES, please furnish the following information for each such asset.

Yes	
No	

a. Name of Issuing Company	b. Number of Units or Shares	c. Fair Market Value	d. Amount of Indebtedness

e. Are you a member of any investment or barter trading clubs? If yes, provide account statements for the last two years showing investments and current club value.	Yes
	No

Initials _____

43. GIFTS/TRANSFERS. Have you or your spouse transferred, sold, gifted, or in any other way disposed of any assets or property with a cost or fair market value of $300 or more at any time in the past three (3) years? If YES, please furnish the following information for each such asset.	Yes	
	No	

a. Description of Asset	b. Date of Transfer	c. Fair Market Value When Transferred	d. Amount Received	e. Name and Relationship of Transferee to Defendant
		$	$	
		$	$	
		$	$	
		$	$	

44. RECEIVEABLES Do you or your spouse or your companion have any accounts receivable or notes owed to you? If YES, specify as stated below.	Yes	
	No	

a. Account Name	b. Book Value	c. Liquidation Value	d. Amount of Indebtedness	e. Date, if Pledged
	$	$	$	
	$	$	$	
	$	$	$	

45. JUDGMENTS Do you or your spouse have any judgments owed to you? If YES, specify as stated below.	Yes	
	No	

a. Amount of Judgment	b. Full Name of Debtor

46. List all other forms of compensation which you or your spouse receive and which you have not already disclosed (including insurance annuity, disability benefits, lottery winnings, pensions, etc.)

a. Identify Source of Compensation	b. Schedule for Receipt (e.g., Weekly, Monthly)	c. Amount
		$
		$
		$
		$

47. Does anyone or any entity owe any money to you or your spouse not previously disclosed? If yes, please state specific information listed below.	Yes	
	No	

a. Name of Person/Entity	b. Their Address	c. Date of Loan	d. Amount Owed

Initials ______

48. Do you or your spouse have any life insurance policy now in force with right to change beneficiary reserved? If YES, state specific information listed below.	Yes	
	No	

Company Name	b. Policy Number	c. Amount of Policy	d. Present Cash Surrender Value Plus Accumulated Dividends	e. Policy Loan	f. Date Made	g. Premium Date	h. Amount of Payments Made

49. Do you or your spouse have any life insurance policy assigned or pledged on any indebtedness?	Yes	
	No	

If any of the policies listed in item 49, above, are assigned or pledged on indebtedness, except with insurance companies, give the following information about each policy:

a. Policy Number	b. Name and Address of Pledge or Assignee	c. Amount of Indebtedness	d. Date, if Pledged

50. Do you or your spouse/companion or dependents own or have any ownership interest in any jewelry, antiques, precious metals, art objects, stamp or coin collections or other assets of any kind with a total value in excess of $500? If YES, state specific information listed below.	Yes	
	No	

a. Asset	b. Date Acquired	c. Value at Acquisition	d. Present Value

51. Do you or your spouse/companion or dependents own any furniture and fixtures, including machinery or equipment? If YES, state specific information listed below.	Yes	
	No	

a. Description	b. Purchase Price	c. Current Value	d. Amount of Indebtedness	e. Date, if Pledged
1. Furniture and Fixtures (business)	$	$	$	
2. Furniture (household/residence)	$	$	$	
3. Machinery (specify type)	$	$	$	
4. Equipment (specify type)	$	$	$	
Total	$	$	$	

Initials ______

52. STATEMENT OF YOUR INCOME	Per Pay Period	This Year to Date	Last Year Total
a. Gross Income	$	$	$
b. Salaries, Wages, Commissions	$	$	$
c. Dividends	$	$	$
d. Interest	$	$	$
e. Income from business or profession	$	$	$
f. Partnership income	$	$	$
g. Capital Gains or Losses (from Schedule D, Form 1040)	$	$	$
h. Annuities and pensions	$	$	$
I. Rents and royalties	$	$	$
j. Income from estates and trusts	$	$	$
k. Total Gross Income	$	$	$
l. Federal Income Tax Itemized Deductions	$	$	$
m. Contributions	$	$	$
n. Interest Paid	$	$	$
o. Taxes Paid	$	$	$
p. Casualty Losses (by fire, storm, etc.)	$	$	$
q. Bad Debts	$	$	$
r Depreciation			
s. Total Deductions	$	$	
t. Net Income (loss)	$	$	
u. Nontaxable income	$	$	$
v. Total Net Income	$	$	$

53. Have you any inheritance, life interest or remainder interest, either vested or contingent, in any trust or estate, or are you a beneficiary of any trust or estate? If YES, please furnish a copy of the instrument creating the trust or estate and also, give the following information.	Yes	
	No	

a. Name of Trust or Estate	**b. Present Value of Assets**	**c. Value of Your Interest**	**d. Annual Income Received from this Source**
	$	$	$
	$	$	$
	$	$	$
	$	$	$

Initials _____

54. Are you the grantor or donor of any trust, or the trustee or fiduciary for any trust? If YES, please furnish a copy of the instrument creating the trust and give present value of corpus of trust, and any other pertinent information.	Yes	
	No	
Trust	b. Value of Trust	

55. Have you any other assets or any interest in assets, either actual or contingent, other than those previously identified here? If YES, please describe each such asset including present value.	Yes	
	No	
a. Description	b. Present Value	

56. Are foreclosure proceedings pending on any real estate which you own or have an interest in?	Yes	
	No	

If YES, please give location of real estate, court caption and case number of foreclosure proceedings.

a. Court Caption: ______________________ Case No. ______________________
Location: ______________________

b. Court Caption: ______________________ Case No. ______________________
Location: ______________________

Court Caption: ______________________ Case No. ______________________
Location: ______________________

Was the Government made a party to any such foreclosure suit? If YES, please describe.	Yes	
	No	

57. Do you have any bankruptcy or receivership proceedings pending? Have you filed any bankrutpcy proceeding in the last 7 years? If YES, list court caption and case number of all pending cases.	Yes	
	No	

a. Court Caption: ______________________ Case No. ______________________
Location: ______________________ Date Closed (if applicable) ______________________

b. Court Caption: ______________________ Case No. ______________________
Location: ______________________ Date Closed (if applicable) ______________________

c. Court Caption: ______________________ Case No. ______________________
Location: ______________________ Date Closed (if applicable)

58. What is the prospect of an increase in value of your assets or your present income? (Please give a general statement.)

Initials ______

59. Are you a party to any civil lawsuit now pending? If YES, please describe each such lawsuit by court name and case number.	Yes	
	No	

a. Court Caption: ______________________ Case No.______________
Location: ______________________

b. Court Caption: ______________________ Case No.______________
Location: ______________________

c. Court Caption: ______________________ Case No.______________
Location:

60. Is anyone holding any money or other property of any kind on your behalf or for you?	Yes	
	No	

If YES, please identify each person by name and address and amount of money or other property being held for you.

a. Name	b. Address	c. Amount of Money/or Value of Property Being Held For You.
		$
		$
		$
		$
		$

61. Do you receive, or under any circumstances expect to receive, any benefits from a claim for compensation or damages? If YES, please identify in specific detail.	Yes	
	No	

62. Did you file a federal income tax return last year?	Yes		Joint	
	No		Individual	

Please attach complete copies of each federal income tax return you filed for the last three (3) years. Mark yes or no to indicate whether copies of your tax returns are attached as required.	Yes	
	No	
63. Has the IRS audited any of your tax returns?	Yes	
	No	
64. Are your federal taxes current?	Yes	
	No	
65. Do you anticipate receiving or have received within the last six (6) months a tax refund from any entity?	Yes	
	No	

a. If YES, list from whom and the amount of each refund.	b. Amount of Refund
	$
	$
	$

Initials _____

66. CREDIT CARDS: Do you have any credit card, charge account or line of credit?	Yes		
	No		

If yes, please identify each type of account or credit/charge card, the name and address of the issuer, the credit limit, amount owed and the minimum monthly payment.

a. Type of Account or Card	b. Name and Address of Issuer	c. Credit Limit	d. Amount Owed	e. Minimum Monthly Payments

67. OUTSTANDING LOANS: Do you have any outstanding loans payable to banks, finance companies, etc?	Yes		
	No		

If yes, please identify each type of account, the name and address of the issuer, the credit limit, amount owed and the minimum monthly payment.

a. Type of Account	b. Name and Address of Institution	c. Credit Limit	d. Amount Owed	e. Minimum Monthly Payments

68. JUDGMENTS Do you or your spouse have any judgments against you? If YES, specify as stated below.	Yes	
	No	

a. Amount of Judgment	b. Full Name of Creditor

69. OTHER ASSETS: Do you own or control any asset or thing of value, including cash or any certificate of deposit or other instrument or account, not previously disclosed with a value in excess of $300?	Yes	
	No	

If yes, please identify each such asset or thing of value and state the worth of each and its present location.

a. Asset	b. Current Value	c. Location

Initials _____

70. PRESENT FINANCIAL NEEDS

In order to help determine your financial needs as well as those of your dependents, provide the following information as to present monthly income and expenses.

EARNINGS/OTHER INCOME	Yours	Spouse	Total
a. Net salary			
b. Overtime			
c. Part-time job			
d. Commission			
e. Net profit from business			
f. Net rental income			
g. Pension			
h. Social Security			
I. Interest			
j. Dividends			
k. Alimony/Child support			
l. Income of other dependents			
m. Social Services			
n. Food Stamps			
o. Benefits from the U.S.			
p. Disability Compensation			
q. Military Pay			
s. Income from relatives			
t. Other (lottery winnings, royalties, user fees, tax refunds, etc.)			
l TOTAL			

MONTHLY EXPENSES	
a. Home Rent or Mortgage	
b. Utilities: Electric	
Heating Oil/Gas/Wood	
Water/Sewer	
Telephone	
Cell Phones	
c. Groceries	
d. Insurance:	
Auto	
Health	
Life	
Homeowners/renters	
e. Minimum installment payments	
f. Transportation	
g. Medical	
h. Clothing	
i. Alimony	
j. Daycare/Babysitting	
k. Cable TV/Satellite System	
l. Tuition (college/private)	
m. Child Support	
n. Entertainment	
o. Personal Care/Hygiene	
p. Dry Cleaning/Laundromat	
q. Gifts	
r. Newspaper/Magazines	
s. Tobacco	
t. Internet Access	
u. Organization/Health Club	
v. Veterinary Fees	
w. Charitable contributions	
x. Other	
y. Other	
z. Other	

Initials ______

*Explain fully here any unusual, recurring monthly expenses you have for yourself or any dependent.

71. Criminal Activity
How long were you engaged in the criminal activity to which you pled guilty?
Did you make any gains or profits from the criminal activity? If no, why not?
Where did you deposit and/or spend the illegal gains and profits? List specifically what property you purchased (i.e., cars, jewelry, guns).
Name the bank(s), account name(s), and account number(s) where illegal gains and profits were deposited and from which they were spent.
Specifically, identify the location of other gains and profits which were made.
How much did you win gambling with your illegal profits?

72. Pursuant to the instructions to this Financial Disclosure Statement, I have attached additional pages to complete this document.	Yes	
	No	
If YES, there are ____ (insert number) of supplemental pages attached to this Financial Disclosure Statement.		

73. Declaration Under Penalties of Perjury

With knowledge of the maximum penalties for false statements provided by Title 18 U.S.C. § 1001 {five (5) years imprisonment and/or a fine of not more than $250,000} and with the knowledge that this financial disclosure statement is submitted by me to affect action by the United States Department of Justice, I certify that the above responses are all true and correct and represent that this is a complete statement of all my income, assets and liabilities, real and personal, either held in my name or by any others, as well as expenses as of this date.

Date: ___________ Signature: ______________________________

Initials _____

74. AUTHORITY TO RELEASE INFORMATION

I hereby authorize the United States Attorney's Office to speak to the following individuals regarding this debt. If this release is not provided, the United States Attorney will not answer questions nor provide any information to any other party in this matter.

a. FULL NAME:______________________________
(Last) (First) (Middle)

______________________ ______________________________
Date Signature

75. AUTHORITY TO OBTAIN CREDIT REPORT

I hereby authorize the United States Attorney's Office to obtain a credit report at any time. I understand that my signature below allows the United States to use a credit report for identifying information as well as for collection of any debt. This permission is given to the United States pursuant to 15 U.S.C. § 1681b. That statute provides authority for a credit reporting agency to furnish my consumer report with my written permission.

NAME:______________________________
(Last) (First) (Middle)

______________________ ______________________________
Date Signature

76. SPOUSE/COMPANION AUTHORITY TO RELEASE INFORMATION

I certify that I am the spouse/companion of the debtor in this case. By signature below, I am granting the United States the permission to **obtain a copy of my cedit report to verify financial information and assist in the collection of the debt of this case.**

a. FULL NAME:______________________________
(Last) (First) (Middle)

b. SIGNATURE. OF SPOUSE/COMPANION______________________________

c. DATE OF BIRTH	____/____/____	

Initials ______

d. ADDRESS:________________________________ STATE____________ ZIP____________	
e. SOCIAL SECURITY NO. ______/______/_______	f. TELEPHONE NUMBER ( ) ______________

77. AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

In connection with the financial investigation being conducted by the UNITED STATES ATTORNEY, I hereby authorize any authorized representative or agent of the UNITED STATES ATTORNEY bearing this release, or copy thereof, within five years of its date, to obtain any information in your files pertaining to my employment, military, credit or educational records, including, but not limited to, academic achievement, attendance, athletic, personal history, and disciplinary records, medical records, credit records, financial records, city, state, and federal tax records, returns and supporting documentation; bank records or records of any financial institution or entity; and records maintained by any city, county, state, or federal agency. I hereby direct you to release such information upon request of the bearer.

This release is executed with full knowledge and understanding that the information will be used in connection with the consideration of my liability on a debt claimed by the UNITED STATES and my financial ability to pay said debt and/or to determine what income and assets I may have available to contribute toward restitution, fines and forfeitures of any nature, and that the information will be disseminated only to those individuals or agencies directly involved in this determination or to fulfill other obligations imposed by law, regulation or presidential directive or executive order.

I hereby release you, as the custodian of such records, and school, college, university or other educational institution, financial institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, retail business establishment, or public agency, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any question as to the validity of this release, you may contact me as indicated below.

a. FULL NAME:____
(Last) (First) (Middle)

____________________ ____________________________
Date Signature

Initials _____

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  - Restricted delivery service, which provides delivery to the addressee specified by name, or to the addressee's authorized agent.
  - Adult signature service, which requires the signee to be at least 21 years of age (not available at retail).
  - Adult signature restricted delivery service, which requires the signee to be at least 21 years of age and provides delivery to the addressee specified by name, or to the addressee's authorized agent (not available at retail).
- To ensure that your Certified Mail receipt is accepted as legal proof of mailing, it should bear a USPS postmark. If you would like a postmark on this Certified Mail receipt, please present your Certified Mail item at a Post Office™ for postmarking. If you don't need a postmark on this Certified Mail receipt, detach the barcoded portion of this label, affix it to the mailpiece, apply appropriate postage, and deposit the mailpiece.

IMPORTANT: Save this receipt for your records.